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Prema Maria Mertz, Ph.D.

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NOTES/COMMENTS:

Re: Application No. 09/910,695

In Re Application of Joseph A. Hedrick et al., Filed: 07/20/2001

Group Art Unit: 1646; Attorney Docket No. DX0757K

For: 7 TRANSMEMBRANE RECEPTOR FAMILY MEMBER BLRX

Dear Examiner Mertz:

Transmitted herewith are:

- Transmittal Form 1 page
- Supplemental Amendment 4 pages
- Certificate of Fax Transmission 1 page
- Fax Cover Sheet 1 page

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TRANSMITTAL	Filing Date	07/20/2001
FORM	First Named Inventor	Hedrick et al.
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(to be used for all correspondence and much in	Examiner Name	Mertz, Prema Maria
Total Number of Pages in This Submission	7 Attorney Docket Number	DX0757K
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Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Add Terminal Discialmer Request for Refund CD, Number of CD(s) Remarks	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietery Information Status Letter Other Enclosure(s) (please Identify below): Certificate of Fax Transmission - 1 page Fax Cover Sheet - 1 page
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Attorney Docket No.: DX0757K

First Named Inventor: Joseph A. Hedrick et al.

Application No.: 09/910,695

Filing Date: 07/20/2001

PTC/SB/97 (08-00)
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PATENT CASE: DX0757K

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Hedrick et al. : Examiner: Prema Maria Mertz

For: 7 TRANSMEMBRANE RECEPTOR FAMILY : Group Art Unit: 1646
MEMBER BLRX :

Serial No.: 09/910,695

Filing Date: July 20, 2001 :

October 16, 2003

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

SUPPLEMENTAL AMENDMENT

We request entry of the following additional amendment. Please charge any additional fees or credit any overpayment to Deposit Account No. 19-0365.

Please amend the application as detailed below.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 4 of this paper.